



**KARYA TULIS AKHIR**

**HUBUNGAN TINGKAT PREEKLAMPSIA (ONSET TERJADINYA)  
DENGAN KEJADIAN BAYI BERAT LAHIR RENDAH (BBLR)**

**Oleh:**

**Puteri Ramasari**

**201610330311038**

**FAKULTAS KEDOKTERAN**

**UNIVERSITAS MUHAMMADIYAH MALANG**

**2020**



KARYA TULIS AKHIR

HUBUNGAN TINGKAT PREEKLAMPSIA (ONSET TERJADINYA)  
DENGAN KEJADIAN BAYI BERAT LAHIR RENDAH (BBLR)

Oleh:

Puteri Ramasari

201610330311038

FAKULTAS KEDOKTERAN

UNIVERSITAS MUHAMMADIYAH MALANG

2020

**HUBUNGAN TINGKAT PREEKLAMPSIA (ONSET TERJADINYA)  
DENGAN KEJADIAN BAYI BERAT LAHIR RENDAH (BBLR)**

**KARYA TULIS AKHIR**

Diajukan kepada

Universitas Muhammadiyah Malang  
untuk memenuhi salah satu persyaratan  
dalam menyelesaikan program sarjana

Fakultas Kedokteran

Oleh:

Puteri Ramasari

201610330311038

**FAKULTAS KEDOKTERAN  
UNIVERSITAS MUHAMMADIYAH MALANG**

**2020**

## LEMBAR PENGESAHAN

### KARYA TULIS AKHIR

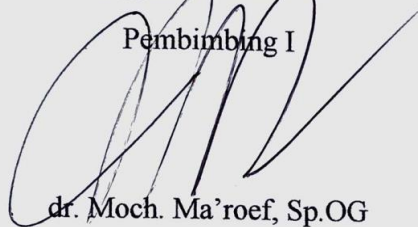
Telah Disetujui Sebagai Hasil Penelitian Untuk Memenuhi Persyaratan

Pendidikan Sarjana Fakultas Kedokteran

Universitas Muhamadiyah Malang

Tanggal: 11 Juni 2020

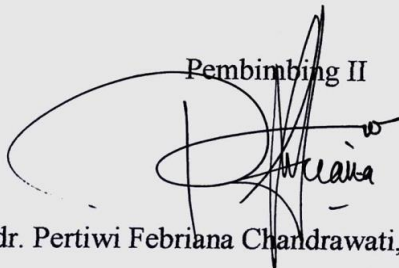
Pembimbing I



dr. Moch. Ma'roef, Sp. OG

NIP. 11305010414

Pembimbing II



dr. Pertiwi Febriana Chandrawati, M.Sc., Sp.A

NIP. 197502152005012001

Mengetahui,

Fakultas Kedokteran Universitas Muhammadiyah Malang

Dekan



dr. dr. Meddy Setiawan, Sp.PD. FINASIM

NIP. 196805212005011002

## LEMBAR PERNYATAAN ORISINALITAS

Bismillahirrahmanirrahim

Dengan menyebut nama Allah SWT/Tuhan Yang Maha ESA

Yang bertandatangan dibawah ini, saya :

Nama : Puteri Ramasari

NIM : 201610330311038

Menyatakan dengan sesungguhnya ide, judul, maupun isi dari karya tulis akhir yang dibuat merupakan hasil pemikiran diri sendiri (non plagiarisme). Semua sumber baik yang dikutip maupun dirujuk telah saya nyatakan dengan benar.

Demikian surat pernyataan saya,

Malang, 26 Juli 2020



(Puteri Ramasari)

## LEMBAR PENGUJIAN

Karya Tulis Akhir oleh Puteri Ramasari ini  
Telah Diuji dan Dipertahankan di Depan Tim Penguji  
Pada Tanggal 11 Juni 2020

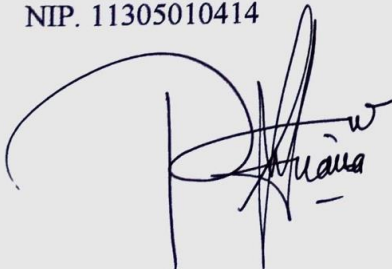
Tim Penguji



Dr. dr. Febri Endra Budi Setyawan, M.Kes., FISPH., FISCN , Ketua  
NIP. 11305010416



dr. Moch. Ma'roef, Sp.OC , Anggota  
NIP. 11305010414



dr. Pertiwi Febriana Chandrawati, M.Sc., Sp.A , Anggota  
NIP. 197502152005012001

## KATA PENGANTAR



Puji syukur kehadiran Allah SWT karena atas rahmat dan hidayah-Nya, penulisan tugas akhir ini dapat diselesaikan dengan baik dan tepat waktu. Shalawat serta salam selalu tercurahkan kepada Rasulullah Muhammad Shalallahu Alaihi Wasallam, keluarga, para sahabat, dan pengikut beliau yang telah membawa dunia ini dari zaman kegelapan menuju zaman terang-benderang.

Tugas akhir ini berjudul “Hubungan Tingkat Preeklamsia (Onset Terjadinya) dengan Kejadian Bayi Berat Lahir Rendah (BBLR)”. Tugas akhir ini diajukan untuk memenuhi persyaratan Pendidikan Sarjana Fakultas Kedokteran Universitas Muhammadiyah Malang.

Penulis menyadari tugas akhir ini masih jauh dari kata sempurna, oleh karena itu, penulis sangat mengharapkan saran dan masukan yang membangun. Semoga karya tulis ini dapat menambah wawasan keilmuan dan bermanfaat bagi semua pihak.

Wassalamu’alaikum Warahmatullah Wabarakatuh.

Malang, 26 Juli 2020

Penulis

## DAFTAR ISI

<b>LEMBAR PENGESAHAN .....</b>	<b>iv</b>
<b>LEMBAR PERNYATAAN ORISINALITAS .....</b>	<b>v</b>
<b>LEMBAR PENGUJIAN.....</b>	<b>vi</b>
<b>KATA PENGANTAR.....</b>	<b>vii</b>
<b>UCAPAN TERIMA KASIH.....</b>	<b>viii</b>
<b>RINGKASAN .....</b>	<b>xi</b>
<b>SUMMARY.....</b>	<b>xii</b>
<b>DAFTAR ISI.....</b>	<b>xiii</b>
<b>DAFTAR GAMBAR.....</b>	<b>xv</b>
<b>DAFTAR SINGKATAN.....</b>	<b>xvi</b>
<b>DAFTAR LAMPIRAN .....</b>	<b>xvii</b>
<b>BAB 1 PENDAHULUAN .....</b>	<b>1</b>
1.1 Latar Belakang.....	1
1.2 Metode.....	2
1.3 Gagasan .....	2
1.4 Fokus Pembahasan .....	3
1.6 Manfaat Pembahasan.....	3
1.6.1 Bagi Akademik .....	3
1.6.2 Bagi Klinis.....	3
1.6.3 Bagi Masyarakat .....	3
<b>BAB 2 TINJAUAN PUSTAKA.....</b>	<b>4</b>
2.1 Preeklamsia.....	4
2.1.1 Pengertian .....	4
2.1.2 Kriteria Diagnosis Preeklamsia .....	4
2.1.3 Etiologi.....	6
2.1.4 Patogenesis.....	8
2.1.5 Gejala Preeklamsia .....	11
2.1.6 Faktor Risiko.....	13



2.1.7 Penatalaksanaan .....	16
2.1.8 Komplikasi.....	18
2.2 Bayi Berat Lahir Rendah (BBLR).....	20
2.2.1 Pengertian .....	20
2.2.2 Klasifikasi .....	20
2.2.3 Gambaran Klinis BBLR.....	21
2.2.4 Penatalaksanaan .....	21
2.2.5 Komplikasi.....	24
2.3 Hubungan Preeklamsia dengan Bayi Berat Lahir Rendah (BBLR) .....	24
2.4 Alur Teori .....	26
<b>BAB 3 PEMBAHASAN .....</b>	<b>27</b>
<b>BAB 4 PENUTUP.....</b>	<b>43</b>
4.1 Kesimpulan.....	43
4.2 Saran .....	43
<b>DAFTAR PUSTAKA .....</b>	<b>44</b>
<b>LAMPIRAN.....</b>	<b>49</b>



## DAFTAR GAMBAR

Nomor	Judul Gambar	Halaman
Gambar 2.1	Invasi Trofoblastik Abnormal	6



## DAFTAR SINGKATAN

ADMA	: <i>Asymmetric dymethylarginine</i>
AFP	: <i>Alfa-fetoprotein</i>
APGAR	: <i>Appearance, Pulse, Grimace, Activity, Respiration</i>
ARDV	: <i>Absent of Reversed end Diastolic</i>
AT1-AA	: <i>Autoantibodi angiotensin II tipe 1</i>
BBLER	: <i>Bayi Berat Lahir Ekstrim Rendah</i>
BBLR	: <i>Bayi Berat Lahir Rendah</i>
BBLSR	: <i>Bayi Berat Lahir Sangat Rendah</i>
CGMP	: <i>Cyclic Guanosine Monophospate</i>
CRP	: <i>C-Reactive Protein</i>
DNA	: <i>Deoxyribo Nucleic Acid</i>
ET-1	: <i>Endothelin</i>
FGR	: <i>Fetal Growth Restriction</i>
HLA-G	: <i>Human Leukocyte Antigen-G</i>
IMT	: <i>Indeks Massa Tubuh</i>
IUGR	: <i>Intra Uterine Growth Retardation</i>
LDH	: <i>Laktat Dehidrogenase</i>
MMPs	: <i>Matrix Metalloproteinase</i>
NICU	: <i>Neonatal Intensive Care Unit</i>
NO	: <i>Nitrat Oksida</i>
PGI2	: <i>Prostaglandin endotel</i>
PIGF	: <i>Placental Intensive Growth Factor</i>
RNA	: <i>Ribonucleic Acid</i>
sFlt1	: <i>fms-like tyrosine kinase</i>
SGA	: <i>Small of Gestational Age</i>
SUPAS	: <i>Survei Penduduk Antar Sensus</i>
UE3	: <i>Unconjugated estriol</i>
VEGF	: <i>Vascular Endothelial Growth Factor</i>

## DAFTAR LAMPIRAN

Nomor	Judul Lampiran	Halaman
Lampiran 1	Rangkuman Jurnal	45
Lampiran 2	Rangkuman Buku Literatur	83
Lampiran 3	Lembar Konsultasi	89
Lampiran 4	Lembar Hasil Plagiasi	90



### DAFTAR PUSTAKA

- Armaly, Z., Jadaon, J. E., Jabbour, A. & Abassi, Z. A., 2018. Preeclampsia: Novel Mechanisms and Potential Therapeutic Approaches. *Frontiers in Physiology*, 9(973), pp. 1-15. doi: 10.3389/fphys.2018.00973.
- Badan Pusat Statistik Jawa Timur, 2016-2017. *Jumlah Bayi Lahir, BBLR, dan Bergizi Buruk menurut Kabupaten/Kota di Provinsi Jawa Timur*. [Online] Available at: <https://jatim.bps.go.id/dynamictable/2017/09/22/110/jumlah-bayi-lahir-berat-badan-lahir-rendah-bblr-dan-bergizi-buruk-menurut-kabupaten-kota-di-provinsi-jawa-timur-2016-2017.html> [Diakses 11 May 2019].
- Bakrania, B., Duncan, J., Warrington, J. P. & Granger, J. P., 2017. The Endothelin Type A Receptor as a Potential Therapeutic Target in Preeclampsia. *International Journal of Molecular Sciences*, 18(3), pp. 1-8. doi: 10.3390/ijms18030522.
- Berg, C. B. v. d. et al., 2017. Early- and late-onset preeclampsia and the DNA methylation of circadian clock and clock-controlled genes in placental and newborn tissues. *Chronobiology International*, 34(7), pp. 921-932. doi: <https://doi.org/10.1080/07420528.2017.1326125>.
- Boeldt, D. S. & Bird, I. M., 2017. Vascular adaptation in pregnancy and endothelial dysfunction in preeclampsia. *Journal of Endocrinology*, 232(1), pp. 27-44. doi: <https://doi.org/10.1530/JOE-16-0340>.
- Braunthal, S. & Brateanu, A., 2019. Hypertension in pregnancy: Pathophysiology and treatment. *Sage Open Medicine*, Volume 7, pp. 1-15. doi: <https://doi.org/10.1177/2050312119843700>.
- Burton, G. J. & Jauniaux, E., 2018. Pathophysiology of placental-derived fetal growth restriction. *American Journal of Obstetrics & Gynecology*, 218(2), pp. S745-S761. doi: <https://doi.org/10.1016/j.ajog.2017.11.577>.
- Burton, G. J., Redman, C. W., Roberts, J. M. & Moffett, A., 2019. Pre-eclampsia: pathophysiology and clinical implications. *The British Medical Journal*, 366(I2381), pp. 1-15. doi: <https://doi.org/10.1136/bmj.l2381>.
- Burton, G. J., Redman, C. W., Roberts, J. M. & Moffett, A., 2019. Pre-eclampsia: pathophysiology and clinical implications. *The British Medical Journal*, 366(I2381), pp. 1-15.
- C.W.Redman, 2017. Early and late onset preeclampsia: Two sides of the same coin. *Pregnancy Hypertension: An International Journal of Women's Cardiovascular Health*, Volume 7, p. 58. doi: <https://doi.org/10.1016/j.preghy.2016.10.011>.

- Cornelius, D. C., 2018. Preeclampsia: From Inflammation to Immunoregulation. *Clinical Medicine Insights: Blood Disorders*, Volume 11, pp. 1-6. doi: 10.1177/1179545X17752325.
- Cunningham, et al., 2018. Hipertensi dalam Kehamilan. Dalam: J. S. Dashe, penyunt. *Obstetri Williams*. 23rd penyunt. Jakarta: Penerbit Buku Kedokteran EGC, pp. 740-794.
- Das, K. K., Majumdar, M. K. & Rajkumari, S., 2018. To Study the Risk Factors Associated with Early Onset versus Late Onset Preeclampsia and Its Fetomaternal Outcome. *International Journal of Research and Review*, 5(12), pp. 1-7.
- Dinas Kesehatan Provinsi Jawa Timur, 2018. *Profil Kesehatan Provinsi Jawa Timur tahun 2017*, Jakarta: Kementerian Kesehatan Republik Indonesia.
- Duhig, K., Vandermolen, B. & Shennan, A., 2018. Recent advances in the diagnosis and management of pre-eclampsia [version 1; referees: 2 approved]. *F1000Research*, Volume 242, pp. 1-8. doi: 10.12688/f1000research.12249.1.
- El-Sayed, A. A., 2017. Preeclampsia: A review of the pathogenesis and possible management strategies based on its pathophysiological derangements. *Taiwanese Journal of Obstetrics & Gynecology*, 56(2017), pp. 593-598. doi: <https://doi.org/10.1016/j.tjog.2017.08.004>.
- Erez, O. et al., 2017. The prediction of late-onset preeclampsia: Results from a longitudinal proteomics study. *Public Library of Science Journals*, 12(7), pp. 1-28. doi: <https://doi.org/10.1371/journal.pone.0181468>.
- Erez, O. et al., 2017. The prediction of late-onset preeclampsia: Results from a longitudinal proteomics study. *Public Library of Science Journals*, 12(7), pp. 1-28.
- Esch, J. J. A. v., Heijst, A. F. v., Haan, A. F. J. d. & Heijden, O. W. H. v. d., 2017. Early-onset preeclampsia is associated with perinatal mortality and severe neonatal morbidity. *The Journal of Maternal-Fetal & Neonatal Medicine*, 30(23), pp. 2789-2794.
- Fox, R. et al., 2019. Preeclampsia: Risk Factors, Diagnosis, Management, and the Cardiovascular Impact on the O. *Journal of Clinical Medicine*, 8(1625), pp. 1-22. doi: 10.3390/jcm8101625.
- Gomathy, Akurati, L. & Radhika, K., 2018. Early onset and late onset preeclampsia-maternal and perinatal outcomes in a rural tertiary health center. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology*, 7(6), pp. 2266-2269. doi: <http://dx.doi.org/10.18203/2320-1770.ijrcog20182333>.

- Guida, J. P. d. S., Surita, F. G., Parpinelli, M. A. & Costa, M. L., 2017. Preterm Preeclampsia and Timing of Delivery. 39(11), pp. 622-631. doi: 10.1055/s-0037-1604103.
- Haksari, E. L., 2019. Historical Perspectives: Low Birthweight and Preterm Infants in Indonesia. *NeoReviews. An Official Journal of The American Academy of Pediatrics*, 20(10), pp. e548-e560. doi: <https://doi.org/10.1542/neo.20-10-e548>.
- Harmon, Q. E. et al., 2015. Risk of Fetal Death of Preeclampsia. *Obstetrics & Gynecology Journal*, 125(3), pp. 628-635. doi: 10.1097/AOG.0000000000000696.
- Herzog, E. M., Eggink, A. J. & Reijnierse, A., 2017. Placenta. *Impact of early- and late-onset preeclampsia on features of placental*, Volume 49, pp. 72-79. doi: 10.1016/j.placenta.2016.11.014.
- Iacobelli, S., Bonsante, F. & Robillard, P.-Y., 2017. Comparison of risk factors and perinatal outcomes in early onset and late onset preeclampsia: A cohort based study in Reunion Island. *Journal of Reproductive Immunology, Elsevier*, 2017(123), pp. 12-16. doi: 10.1016/j.jri.2017.08.005.
- Kahsay, H. B., Gashe, F. E. & Ayele, W. M., 2018. Risk factors for hypertensive disorders of pregnancy among mothers in Tigray region, Ethiopia: matched case-control study. *BioMed Central Pregnancy and Childbirth*, 18(482), pp. 1-10. doi: <https://doi.org/10.1186/s12884-018-2106-5>.
- Kamrani, A. et al., 2019. The role of epigenetic changes in preeclampsia. *International Union of Biochemistry and Molecular Biology*, pp. 1-13. doi: 10.1002/biof.1542.
- Kementerian Kesehatan Republik Indonesia, 2011. *Manajemen Bayi Berat Lahir Rendah Untuk Bidan dan Perawat*. Jakarta: Departemen Kesehatan.
- Lim, D. C., Cheng, L. N., Zahid, S. & Wong, F. W., 2017. Prostaglandin A for treating pre-eclampsia. *Cochrane Database of Systematic Reviews*, Issue 2, pp. 1-11. doi: 10.1002/14651858.CD009657..
- Lokki, I., Karolina, J. & Laivuori, H., 2018. The Immunogenetic Conundrum of Preeclampsia. *Frontiers in Immunology*, 9(2630), pp. 1-8. doi: 10.3389/fimmu.2018.02630.
- Mayrink, J., Costa, M. L. & Cecatti, J. G., 2018. Preeclampsia in 2018: Revisiting Concepts, Physiopathology, and Prediction. *The Scientific World Journal*, 18(6268276), pp. 1-9. doi: 10.1155/2018/6268276.

- Mayrink, J. et al., 2019. Incidence and risk factors for Preeclampsia in a cohort of healthy nulliparous pregnant women: a nested case-control study. *Scientific Reports*, 9(9517), pp. 1-9. doi: <https://doi.org/10.1038/s41598-019-46011-3>.
- Mei, Y. & Lin, Y., 2018. Clinical significance of primary symptoms in women with placental abruption. *The Journal of Maternal-Fetal & Neonatal Medicine*, 31(18), pp. 2446-2449. doi: <https://doi.org/10.1080/14767058.2017.1344830>.
- Michita, R. T., Kaminski, V. d. L. & Chies, J. A. B., 2018. Genetics varian in preeclampsia: Lessons from studies in Latin-American Populations. *Frontiers in Physiology*, 9(1771), pp. 1-26. doi: 10.3389/fphys.2018.01771.
- National Institute for Health and Care Excellence, 2019. Hypertension in Pregnancy: Diagnosis and Management. *National Institute for Health and Care Excellence guideline*, pp. 1-55.
- Ndwiga, C. et al., 2020. Clinical presentation and outcomes of preeclampsia and eclampsia at a national hospital, Kenya: A retrospective cohort study. *Public Library of Science*, 15(6), pp. 1-15. doi: <https://doi.org/10.1371/journal.pone.0233323>.
- Onis, M. d., Borghi, E., Estevez, D. & Stevens, G. A., 2019. Low Birthweight Estimates. *United Nations International Children's Fund-World Health Organization Low Birthweight Estimates Levels and trends 2000–2015*, pp. 1-36.
- Portelli, M. & Baron, B., 2018. Clinical Presentation of Preeclampsia and the Diagnostic Value of Proteins and Their Methylation Products as Biomarkers in Pregnant Women with Preeclampsia and Their Newborns. *Journal of Pregnancy*, 2018(2632637), pp. 1-24. doi: <https://doi.org/10.1155/2018/2632637>.
- Prawirohardjo, S., 2014. Hipertensi dalam Kehamilan. Dalam: A. B. Saifuddin, penyunt. *Ilmu Kebidanan*. Jakarta: PT Bina Pustaka Sarwono Prawirohardjo, pp. 531-559.
- Pusat Data dan Informasi Kementerian Kesehatan RI, 2017. Pelayanan Darah di Indonesia. *Infodatin Pelayanan Darah di Indonesia*, pp. 1-11.
- Rana, S., Lemoine, E., Granger, J. & Karumanchi, S. A., 2019. Preeclampsia: Pathophysiology, Challenges, and Perspectives. *American Heart Association Journal*, pp. 1094-1111. doi: 10.1161/circresaha.118.313276..
- Say, L. et al., 2014. Global causes of maternal death: a World Health Organization systematic analysis. Volume 2, pp. 1-11. doi: 10.1016/S2214-109X(14)70227-X.



- Shao, Y. et al., 2017. Pre-pregnancy BMI, gestational weight gain and risk of preeclampsia: a birth cohort study in Lanzhou, China. *BioMed Central Pregnancy and Childbirth*, 17(400), pp. 1-8. doi: <https://doi.org/10.1186/s12884-017-1567-2>.
- Stanek, J., 2018. Histological Features of Shallow Placental Implantation Unify Early-Onset and Late-Onset Preeclampsia. *Pediatric and Developmental Pathology*, pp. 1-11. doi: [doi:10.1177/1093526618803759](https://doi.org/10.1177/1093526618803759).
- Sulistijono, E. et al., 2016. Asuhan Nutrisi pada Bayi Prematur. *Ikatan Dokter Anak Indonesia*, pp. 8-44.
- Tateishi, A., Ohira, S., Yamamoto, Y. & Kanno, H., 2018. Histopathological findings of pregnancy-induced hypertension: histopathology of early-onset type reflects two-stage disorder theory. *Virchows Archiv*, 472(4), pp. 635-642. doi: [10.1007/s00428-018-2315-3](https://doi.org/10.1007/s00428-018-2315-3).
- Tomimatsu, T. et al., 2019. Preeclampsia: Maternal Systemic Vascular Disorder Caused by Generalized Endothelial Dysfunction Due to Placental Antiangiogenic Factors. *International Journal of Molecular Sciences*, 20(17), pp. 1-18. doi: [10.3390/ijms20174246](https://doi.org/10.3390/ijms20174246).
- Trana, P. L. et al., 2019. Recurrent or first preeclampsia in multiparae: A case-control study of singleton pregnancies in Reunion Island. *European Journal of Obstetrics & Gynecology and Reproductive Biology*, Volume 240, pp. 80-86. doi: [10.1016/j.ejogrb.2019.06.013](https://doi.org/10.1016/j.ejogrb.2019.06.013).
- United Nations International Children's Fund-World Health Organization, 2019. Low Birthweight Estimates. pp. 1-36.
- Weitzner, O. et al., 2018. Preeclampsia: risk factors and neonatal outcomes associated with early- versus late-onset disease. *The Journal of Maternal-Fetal & Neonatal Medicine*, pp. 1-11. doi: [10.1080/14767058.2018.1500551](https://doi.org/10.1080/14767058.2018.1500551).
- Wibowo, N., Irwinda, R. & Frisdiantiny, E., 2016. Diagnosis dan Tatalaksana Preeklampsia. *Perkumpulan Obstetri dan Ginekologi Indonesia*. pp. 1-59.
- World Health Organization, 2010. International Statistical Classification of Disease and Related Health Problems. *International Statistical Classification of Disease and Related Health Problems 10th revision*, Volume 2, pp. 1-201.
- Zembala-Szczerba, M. et al., 2019. Early- and Late-Onset Preeclampsia: A Comprehensive Cohort Study of Laboratory and Clinical Findings according to the New ISHHP Criteria. *International Journal of Hypertension*, Volume 2019, pp. 1-10. doi: <https://doi.org/10.1155/2019/4108271>.

## Lampiran 4. Hasil Plagiasi



## UNIVERSITAS MUHAMMADIYAH MALANG

## FAKULTAS KEDOKTERAN

Kampus II : Jl. Bendungan Sutami 188 A Tlp. 0341-552443 Hunting 0341-551149  
Fax. 0341-582060 E-mail : [webmaster@unix.umm.ac.id](mailto:webmaster@unix.umm.ac.id) Website : [www.umm.ac.id](http://www.umm.ac.id)

## HASIL DETEKSI PLAGIASI

Berikut ini adalah hasil deteksi plagiasi karya ilmiah (naskah proposal / naskah hasil penelitian / naskah publikasi)\*

Nama : Puteri Ramasari  
Nim : 201610330311038  
Judul : Hubungan Tingkat Preeklamsia (Onset Terjadinya) dengan Kejadian Bayi Berat Lahir Rendah (BBLR)

NO	Bagian	Maksimum Kesamaan	Hasil Deteksi		
			Tgl	Tgl	Tgl
			18-07-20		
1	Bab 1 (Pendahuluan)	10	3 %		
2	Bab 2 (Tinjauan Pustaka )	25	1 %		
4	Bab 3 (Pembahasan)	15	1 %		
5	Bab 4 (Kesimpulan dan Saran )	5	0 %		
6	Naskah Publikasi	25	1 %		

Kesimpulan Deteksi Plagiasi : LOLOS / ~~TIDAK LOLOS PLAGIASI~~

Mengetahui  
Pembimbing

(dr. Moch. Ma'roef, Sp.Ob.)



Malang, 18 Juli 2020  
Tim Deteksi Plagiasi FKUMM,

(Joko Febrionora)

Kontak Tim Plagiasi FKUMM  
Email : [plagiasifkumm@gmail.com](mailto:plagiasifkumm@gmail.com)  
telp : 0341-551149